

Nebraska Division of Behavioral Health (DBH)
Statewide Quality Improvement Team (SQIT)

March 7, 2012 / 2:00-4:00 p.m.

DBH/Live Meeting

Meeting Minutes

I. Welcome and Attendance

Heather Wood

Heather welcomed everyone to the meeting and introductions were made.

Region 1:	Suzi Davis, Judie Moorehouse, Mia Knotts, Laura, Bonnie
Region 2:	Kathy Seacrest, Nancy Rippen, Theresa
Region 3:	Ann Tvrdik
Region 4:	Amy Stachura, Ingrid
Region 5:	Linda Wittmuss, Patrick Kreifels, Susan Hancock, Christine McCollister, Tami
Region 6:	Kathy Cassel, Lori Thomas, Stacey Brewer, Kathleen Hanson
Consumer Representation:	Kathleen Hanson
Child & Family Services:	Jill Schreck
Division of Behavioral Health:	Sheri Dawson, Heather Wood, Sue Adams Robert Bussard, Maya Chilese, Carol Coussons de Reyes, Renee Faber, Jim Harvey, Cody Meyer, Dan Powers, Blaine Shaffer, Kermit Spade, Chelsea Taylor, Ying Wang, Kelly Dick (recorder)
Magellan:	Lisa Christensen

II. Review of Agenda & Minutes

Heather Wood

- a) Heather reviewed the current agenda.
- b) The floor was opened for comments on the minutes from the December 15, 2011 meeting. There was no discussion, nor were changes recommended.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE/RESULT
Motion made to approve December 15, 2011 minutes.	Group	Approved

III. Consumer Involvement/Recruitment for SQIT

Carol Coussons de Reyes

SQIT Application HANDOUT

- a) The application will be sent to a mailing list and a link will be created on the OCA web site. Try to reach as many as possible, and within your Regions think of who would be an asset to the team.
- b) A team will review Kathi Stringer's Quality Improvement Committee Manual. Team members who will work on the project are: Kathleen Hanson, Judy Moorehouse, Stacey Brewer, Ann Tvrdyk. The group will review the manual prior to the next SQIT meeting and determine next steps.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE/RESULT
Send Doodle to group (cloud site)	Heather	4.16.12
Application for ListServ	Bob	Complete
Send link to Stringer manual to workgroup (incl. Mia Knotts)	Kathleen Hanson/Heather	4.16.12
Please respond to Consumer Involvement Survey	Regional Administration	5.1.12

IV. Block Grant Report

Jim Harvey

Jim shared a PowerPoint highlighting some of the performance indicators for the implementation report of the Federal Community Mental Health Services Block Grant (that were submitted December 1, 2011).

The presentation also depicted data from the Nebraska Behavioral Health Consumer Survey. Overall the response rate for 2011 is up from the previous year for adults and youth. A change to the survey for FY2011 was the addition of an SQIT question: "The services you received at (name of BH Provider) has improved your quality of life." The results were:

- a) Adults=80.6% positive responses
- b) Youth= 71.5% positive responses (a parent or guardian responds for the youth)

On September 1, 2011 DBH submitted the Federal SAMHSA 2012 Combined Behavioral Health Assessment Plan. DBH has made some changes to the original submission and resubmitted the plan. The resubmitted plan will be available on the web soon at: http://dhhs.ne.gov/behavioral_health/Pages/behavioral_health_index.aspx). The plan includes a table of Prioritized State Planning Activities. These are listed below in no particular order:

1. Substance abuse Prevention
2. Consumer Workforce
3. Peer Recovery Supports
4. SA Treatment – Women's Set Aside Services (including Pregnant Women and Women with Dependent Children)
5. Transition Age Youth and Young Adults
6. Professional Partners Program
7. Co-Occurring Disorder Services
8. Trauma Informed Care
9. Permanent Supportive Housing Services
10. Supported Employment
11. Intravenous Drug Abusers (added upon revision)
12. Tuberculosis (TB) (added upon revision)

Floor was opened for questions.

- a) Were open-ended questions a part of survey? Yes, but these answers have not been analyzed to date.
- b) Think about how the questions are being asked. If all answers were "yes," there would be no authorizations from Magellan.
- c) Heather: What is "quality care" for the State? Asked group to think about the expectations.
- d) Clarification that the BH Consumer Survey is sent to a random sample of those who receive community-based MH or SA services that are funded by DBH.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE/RESULT
Provide open-ended questions/answers to SQIT w/ out personal information.	Ying	Once completed
Amy Stachura is excited to see how their data looks regarding Psych. Inpatient Care Unit Hospital. Forward to Heather when data is pulled together.	Amy Stachura	Once completed

V. Quality Initiatives - Update

Blaine Shaffer, Heather Wood, Team

- a) A Co-Occurring Workgroup met over 18 months and produced a Roadmap. The challenge of the second round for the group is to establish next steps. More information will be coming.
- b) The Evidence Based Practices (EBP) Workgroup (CHARTER HANDOUT) met for the first time on March 1 and had a good discussion. The group will currently be limiting its work to five of the EBP's DBH currently funds and reports on (see Charter). Children services are on hold until the new CFS Director is on board. The next meeting of the EBP Workgroup is April 5.

VI. QI Program Goals for FY12/13

Heather Wood, Sheri Dawson, Team

- b) Six UNMC Nursing Students, split into three groups of two, collaborated with DBH staff on projects.
 - 1. MedTEAM: Produced a Readiness Survey to assess each agency that provides Medication Treatment, Evaluation, And Management (MedTEAM) services in Nebraska. Its purpose is to determine how closely current mental health practice in Nebraska resembles an evidence based model.
 - 2. Lincoln Regional Center, Readmissions and Co-Occurring Disorders: Results of the nurses' study showed that Dual Diagnosis/Co-Occurring Services, where the consumer sees the same clinician or team of clinicians in the same setting, and is provided integrated treatment and interventions, was necessary to see improvement in the number of readmissions for those with co-occurring disorders.
 - 3. Wraparound Fidelity Index (WFI) Interviews: The nurses assisted in creating a questionnaire used during interviews with each Region's Professional Partner or another individual with the Region who was able to address questions regarding their use of the WFI. The goal was to identify a baseline for working with the Regions on fidelity.
- c) Section 3 of DBH's Continuous Quality Improvement Program Plan identifies QI Program Goals for FY11/12. These include:
 - 1. Incorporate the Co-Occurring Quality Initiative Roadmap into the DBH Strategic Plan.
 - 2. Develop and implement performance measurement monitoring and reporting process that is efficient and timely.

SQIT was asked for input regarding ideas for carrying over or incorporating something new into these goals in preparation for FY12/13. Following discussion, the decision was to keep the first two goals intact going forward, and add a third goal: *Provide education for consumers about quality improvement.*

There was also discussion about using focus groups with consumers in the Regions (forums) to establish what questions consumers' want answered. Also, a process should be developed for getting information from the Consumer Survey out to consumers in a comprehensible manner (if they understand how the data from the survey is used, they may be more likely to answer openly).

- d) RQIT Overview:
 - 1. Region 5: Monthly meetings with network providers and some other stakeholders. Focus on data clean up.
 - 2. Region 4: Scheduled every two months or so around NMT and Statewide meetings, and incorporated with providers' meeting (in person and call in).
 - 3. Region 3: Quarterly meetings (however they have a monthly Magellan call with all providers). QI concentrating on outcome measures. Meetings do not include consumers except for Regional Consumer Specialist.
 - 4. Region 2: Quarterly meetings with providers and consumers. They set goals each year and work on those.

5. Region 1: Bimonthly (may change soon to monthly) and includes Regional staff. Consumers are invited and have expressed some interest, but they have not attended. Provider meetings are semi-monthly and include discussion on strategic plan.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE/RESULT
Heather expressed interest in visiting Regional QI (RQIT) meetings in the future.	Heather Wood	TBD

VII. Items for next agenda

Team Members

- Next Steps from Kathi Stringer Manual Review

VIII. Adjournment and next meeting

- Meeting was adjourned at 4:00 p.m.
- Next Meeting is scheduled for June 6, 2012, 2:00 – 4:00 p.m. CDT.

Minutes prepared by the Division of Behavioral Health, Nebraska Department of Human Services. Minutes are intended to provide only a general summary of the proceedings.